

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	26		6/24/00
O.I.P.E. CLASSIFIER	21	10916	6/24/00
FORMALITY REVIEW			8-15-00
RESPONSE FORMALITY REVIEW	10916		9-18-00

INDEX OF CLAIMS

Rejected N Non-elected
 Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original 1	✓
2	0
3	0
4	0
5	✓
6	✓
7	✓
8	0
9	0
10	0
11	0
12	✓
13	NN
14	0
15	NN
16	NN
17	NN
18	NN
19	NN
20	✓
21	✓
22	✓
23	✓
24	✓
25	0
26	0
27	0
28	0
29	0
30	0
31	0
32	0
33	0
34	0
35	0
36	0
37	0
38	0
39	0
40	NN
41	NN
42	NN
43	NN
44	NN
45	✓
46	NN
47	NN
48	NN
49	NN
50	NN

Claim	Date
Final Original 51	✓
52	NN
53	NN
54	0
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Claim	Date
Final Original 101	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here